Module 7: MADAP Formulary and Pharmacy Services - Coordination of Benefits

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About *Alive!* Maryland

The **Maryland Department of Health** has engaged with **HealthHIV** to launch *Alive! Maryland*, the first-ever comprehensive capacity building initiative for the infectious disease and primary care workforces in the State of Maryland.

For more information on this initiative and a listing of trainings, resources, and events, please visit

www.alivemaryland.org

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Services

POINT TO POINT
Technical Assistance Services

- Individualized trainings and technical assistance
- CME-eligible virtual trainings and self-paced curricula

ACCESS POINT
On-Demand Training Resources

- Downloadable resources and toolkits for community partners
- Interactive MDH training calendar

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CBA and Training Core Content Areas

- Effective HIV, Viral Hepatitis, STI Prevention, Care, and Treatment Programs for specific populations
- Health Equity
- Financial and Grants/Management/Compliance
- Care and Treatment
- Organizational and Infrastructure Development
- Prevention and Surveillance
- Ending the HIV Epidemic (EHE)

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Objectives

- Identify factors contributing to coordination of benefits for MADAP pharmacy services
- Discuss updates and changes within the MADAP formulary
- Identify causes of claims issues at pharmacy, and possible steps to resolve those issues

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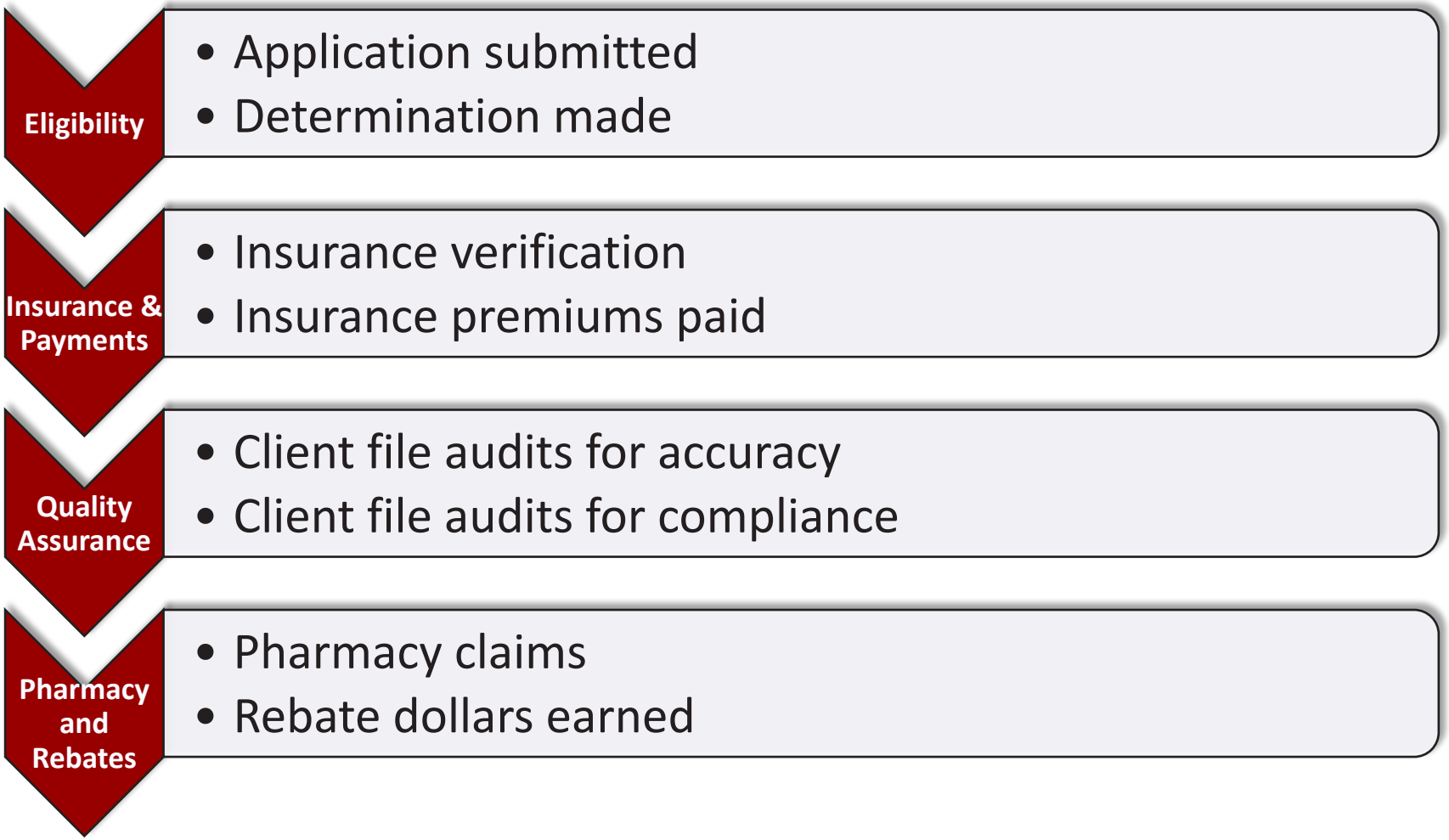
How does MADAP flow?



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MADAP Services

What MADAP covers for eligible clients:

- 100% of the cost of drugs on the formulary for clients with no insurance
- Deductibles, copays and coinsurance of drugs on the formulary for clients with insurance
- Health insurance and/or prescription plan premiums for eligible clients
- Upon eligibility approval and database update for a new or recertifying client, the pharmacy can bill MADAP the next day

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Coordination of Benefits

Definition
What is ‘Coordination of Benefits’? A process in which health plans or programs coordinate to establish which plan is *primary* and which plan is *secondary* when paying for covered services
What is the difference between *primary* and *secondary* coverage? **Primary:** the health plan or program that contributes to initial cost of covered services* **Secondary:** the health plan or program that covers copay or coinsurance cost; can pay up to 100% of the total cost when service is not covered under primary plan

*after any applicable deductible

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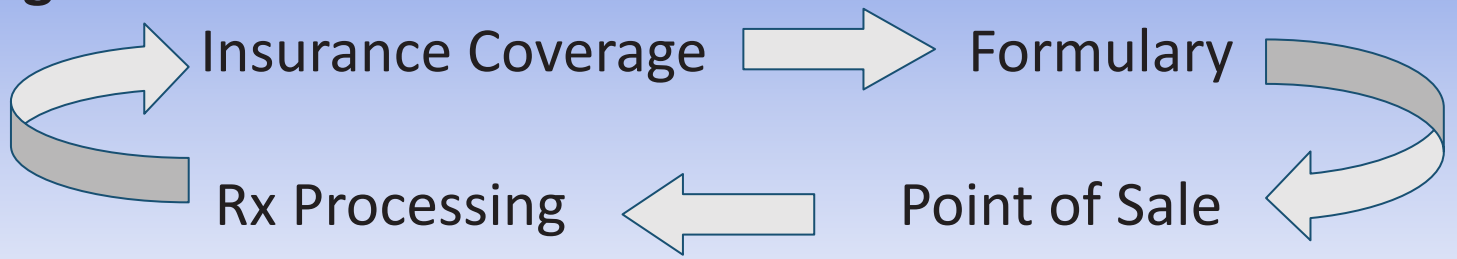
Coordination of Benefits

Contributing Factors

- What role does **MADAP** play?
  - Pays pharmacy costs for covered prescriptions as either *primary* or *secondary,* depending upon client's insurance status. MADAP also pays applicable deductibles for prescriptions

Contributing Factors:



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PAYER OF LAST RESORT

Ryan White Program Requirements
Ryan White Program funds “cannot be used to make payments for any item or service if payment has been made, or can reasonably be expected to be made, with respect to that item or service under any state compensation program, under an insurance policy, or under any federal or state health benefits program; or by an entity that provides prepaid health care.”

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PAYER OF LAST RESORT

Ryan White Program Requirements
If other payer sources exist that could assume responsibility as payer of last resort for a person applying for the ADAP, or enrolled in, the ADAP program.
Not only should the ADAP consider Medicare, Medicaid and private insurance, but also determine if the client has access to employer, union or retiree group health plans; COBRA continuation coverage; or access to a State Pharmaceutical Assistance Program (SPAP).

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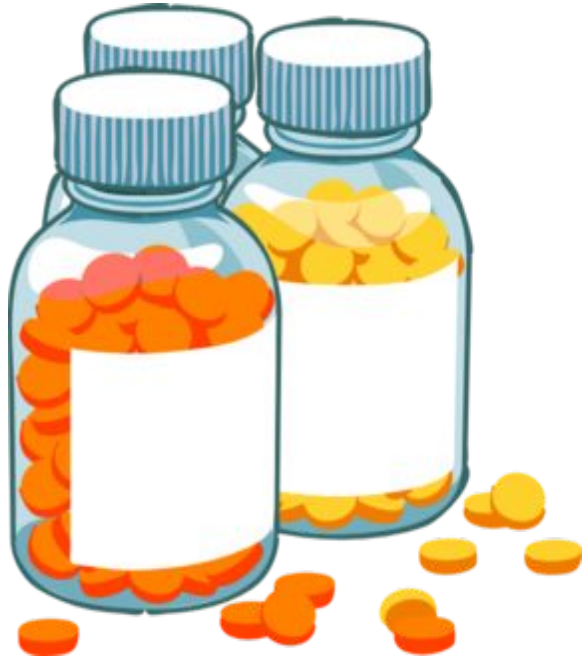
Plan Formularies

- A **formulary** is a list of generic or brand prescription drugs covered by a prescription drug plan or health insurance carrier offering prescription drug benefits. Also called a drug list.
- Formulary-related Terms of Private / Commercial Plans
  - Coverage Tiers & Covered Medications
  - Deductible / Co-pay / Co-insurance
  - Out of pocket limits / maximum
  - Restrictions / Prior Authorization
  - Updates / Changes to medication list

MADAP Formulary

- Effective January 1, 2022 the MADAP formulary is essentially open with certain **excluded drugs**
- The MADAP formulary covers:
  - all FDA approved HIV antiretroviral and Hepatitis C medications, and
  - drugs to prevent and treat clients with conditions associated with HIV infection
- Certain **restricted drugs** require prior authorization
- A user-friendly formulary listing – in the works



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MADAP Formulary Updates

- Notable 2021 MADAP Formulary Updates:
  - Cabenuva
  - COVID - 19 Vaccine

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MADAP Formulary Restrictions

- Current MADAP Prior Authorization Process
  - HCV medications
    - Form located on MADAP website
    - Reviewed by MADAP pharmacy team staff before manual override completed
- Excluded Medications
  - Over-the-counter (OTC) medications
  - Opioid Medications
  - Erectile Dysfunction Medications
  - Nicotine Replacement Therapy

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Pharmacy Point-of-Sale Program

How pharmacies process claims for clients:

- State of Maryland Medicaid Pharmacy Program
  - Pharmacy network/Rebate model program
  - Over 1,700 pharmacies within network
  - Maryland, DC, Virginia, West Virginia, Pennsylvania, Delaware
- Any pharmacy that can bill Maryland Medicaid, including mail-order pharmacies, can bill MADAP
- Conduent - Point of Sale Vendor for Electronic Claims Management
  - Pharmacy Help Line: 1-800-932-3918

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Rx Processing

- Processing Claims
    - Client presents pharmacy primary prescription insurance card (if applicable) as well as MADAP card
- MADAP Filling Restrictions:
    - MADAP allows for 30-day supply for all medications
        - Utilization of 80% of medication before next refill
    - DME supplies (pen needles, syringes) are approved if medication-related product (i.e. insulin) dispensed within the last 34 days

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Rx Processing

- MADAP claims processing (as shown on back of MADAP card)

  MADAP Rx Information:

  BIN: 610084

  PCN: DRAPPROD / PCN: DRAPPROD01 (Medicare Part D)

  Group: MADAP

  ID: 9 4 _ _ _ _ _ _ _ _ _ _ _ (11 digits total)

- Client Related Issues at the Pharmacy:
  - MADAP claim specialists available Monday thru Friday from 8:30 to 4:30
  - After hours, contact help desk 1-800-932-3918

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Rx Processing

- Data Network Interfacing
  - Occurs in real time between pharmacy / providers / insurance
    - Immediate medication claim status
    - Adjudication communication between appropriate parties
    - Decreased rate of error
  - Potential to contain mismatched information between systems

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Prescription Rebilling

- Prescription rebilling may be the result of one of the following:
    - Pharmacy incorrectly billed medication (i.e. client with dual coverage)
    - Pharmacy incorrectly filled medication (i.e. quantity and day supply)
    - Primary not active at time when claim processed (i.e. retro-billing)
    - Delay or issue filling medication (i.e. prior authorization)
- Rebill window for claims is typically 90 days

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Special Considerations

- Early Medication Refills
  - Authorization form available online
    - Must be approved by primary (if applicable)
    - Submit itinerary if early fill due to traveling
    - May obtain up to 90-day supply if approved
  - Approved by MADAP claims specialists
- Lost / Stolen Medication
  - One-time annual override
  - Provide copy of police report if available/applicable

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Problems at the Pharmacy

Handling problems with pharmacies and insurance plans:

- Pharmacy unable to process claims
  - MADAP eligibility, premium payment status
  - Check status of client's insurance plan, prior authorization requirements
- Client can not get medications or paid for medications out of pocket
  - Check client's primary plan benefits, dates, deductibles, formulary
  - Contact information on insurance card, website
- Client lost insurance coverage
  - Check client's insurance enrollment status, Medicare eligibility status, change in employment/group insurance
  - Open enrollment and/or Special enrollment period dates & options

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Recommendations for Prescribers

- Prescribing Considerations
  - Provider made aware of both primary and secondary insurance
  - Medication restrictions within each formulary
    - Prior Authorization
    - Medication not on formulary
    - Brand vs Generic considerations
  - Additional requirements depending on client's plan (i.e. Medicare)
- Pharmacy Network
  - MADAP partners with almost all Maryland pharmacies
    - Pharmacy must in network for the primary
  - Select mail order pharmacies – some primary insurance plans require the use of specialty pharmacies for high-cost medications

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Recommendations for Clients/Case Managers

- Steps to take if clients have problems getting prescriptions filled at the pharmacy
  - Check that current prescriptions are on file for all requested medication
  - Ensure pharmacy contacts MADAP for following issues
    - Denial for drug not covered
    - Primary insurance issues
    - Cost of covered medications
    - Other claims processing issues and denial codes
- Contact MADAP if pharmacy reports a client is not covered

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Coordination of Benefits summary

- If primary coverage exists, then MADAP is payer of last resort – coordination of benefits is crucial to ensure medication access
- MADAP formulary – open formulary with a few exclusions, prior authorization for Hepatitis C medications
- Pharmacy requires complete insurance information – both primary and secondary to ensure smooth processing of claims and coordination of benefits
- Issues may arise – seek assistance from MADAP pharmacy claims specialists

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Resources/References

- Maryland AIDS Drug Assistance Program (MADAP)
  Infectious Disease Prevention and Health Services Bureau
  Prevention and Health Promotion Administration
  Maryland Department of Health
  https://health.maryland.gov/phpa/OIDPCS/Pages/MADAP.aspx
- MADAP Standard Operating Procedures and Reference Guide
  % MADAP
- Code of Maryland Regulation (COMAR)
  Title 10: Maryland Department of Health; Subtitle 18
  www.dsd.state.md.us
- Maryland Medicaid Programs
  https://mmcp.health.maryland.gov
  https://encrypt.emdhealthchoice.org/emedicaid

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